

**Speech-Language Pathology and Audiology Board**

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**STATE OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY BOARD  
Marina Beach Hotel "Marriott"  
4100 Admiralty Way  
Marina Del Rey, CA 90292  
January 16, 2003  
SPEECH-LANGUAGE PATHOLOGY PRACTICE COMMITTEE  
MEETING MINUTES**

**Committee Members Present**

James Till, Ph.D., Chairperson  
Vivian Shannon, M.A.  
Bruce Gerratt, Ph.D.  
Sherry Washington, M.A.

**Staff Present**

Annemarie Del Mugnaio, Executive Officer  
Candace Raney, Staff Analyst  
Lori Newman, Staff Analyst  
George Ritter, Staff Counsel

**Committee Members Absent**

Paul Donald, M.D.

**Board Members Present**

Alison Grimes, AuD  
Marcia Raggio, Ph.D.  
Rebecca Binge, M.A.

**Guests Present**

Wendy Burton, Rancho Los Amigos Medical Center

## **I. Call to Order**

Chairperson Till called the meeting to order at 4:14 p.m.

## **II. Introductions**

Those present introduced themselves.

## **III. Discussion of Developing Regulations to Specify the New Endoscopy Provisions Enacted through Senate Bill 1379**

Mr. Till explained that the materials provided to the Board regarding this matter were prepared by legal counsel, George Ritter. The document outlined six possible areas of ambiguity in Senate Bill 1379 and also provided an expert analysis of those potential areas of ambiguity.

Mr. Till stated that the first issue was that of the requirement for endoscopic procedures to be performed in an acute care facility as defined in the Health & Safety Code Section 1250(a).

Ms. Del Mugnaio stated that she contacted the Department of Health Services (DHS) to inquire about contact information for persons seeking guidance on licensed acute care settings. She stated that she was advised that, by definition, any acute care facility is a licensed facility and any member of the public or profession could direct their inquiry to the facility administration. In addition, DHS branch offices are located in each district of the state and these offices maintain records of all acute care facilities licensed in that area.

Pursuant to guidance from legal counsel, George Ritter, the committee determined that no additional regulations would be necessary to clarify the definition of an acute care facility.

Ms. Washington asked for clarification as to whether facilities that operate under a hospital's acute care license but are located several blocks away and provide services on an out-patient basis, would qualify as acute care facilities. Ms. Del Mugnaio stated that based upon the information she obtained from the DHS, it would qualify as an acute care facility as it meets the requirement of the statute. However, she pointed out that in order for speech-language pathologists to perform endoscopic procedures in a facility, the facility must also meet all other provisions contained in SB 1379.

Mr. Gerratt expressed concern regarding how the general public as well as the licensee population would be notified of the requirements of SB 1379.

Ms. Del Mugnaio explained that board staff is preparing to disseminate an informational mailing that, among other new licensing provisions, will address the specifics of SB 1379. The mailing will be sent to the entire licensing population and will be posted on the Board's website.

M/S/C: Washington/Gerratt

The Committee voted to recommend to the Board that no further clarification or regulatory action be pursued to address this issue. The Executive Officer was directed to distribute an informational mailing to the Board's licensing population.

Mr. Till stated that the issue relative to the definition of "Physician and Surgeon" is very straightforward and requires no further discussion.

M/S/C: Gerratt/Shannon

The Committee voted to recommend to the Board to accept the legal analysis relative to the term "Physician and Surgeon" with no further clarification or regulatory action.

Mr. Till explained that the issue of "direct authorization" by an otolaryngologist is somewhat more complex and called for further discussion.

The Committee discussed the issue of "direct authorization" in terms of when the requirement for direct authorization should apply. After examining the legal analysis in conjunction with the order of the language in SB 1379, the Committee agreed that the intent of the provisions requiring direct authorization by the board certified otolaryngologist applies to the initial 25 endoscopic procedures that must be performed by the speech-language pathologists during their training period.

The Committee also discussed the issue of how many "authorizations" are necessary for the speech-language pathologist to complete their training. It was agreed upon that the law intended to require one authorization by the otolaryngologist before the speech-language pathologist may initiate the training phase for all 25 procedures.

M/S/C: Washington/Gerratt

The Committee voted to recommend to the Board to accept the interpretation of Section 2530.2(f), without pursuing further regulations, regarding the intent of the requirement for "direct authorization" to apply to the authorization by a board certified otolaryngologist for the purposes of authorizing a speech-language pathologist to complete the training requirements of 25 endoscopic procedures.

Mr. Till explained that the next two issues are somewhat related and address the term “supervision” along with the ambiguity that exists between subdivisions (f) and (g) of Section 2530.2.

First, the Board discussed the general meaning of the term “supervision” as it is applied in other areas of the Business and Professions Code. The Committee agreed that it is acceptable to permit varying levels of supervision and that the need for a specific type of supervision should be evaluated by the “legally responsible” supervising physician on a case by case basis taking into consideration the skill level of the speech-language pathologist.

Ms. Del Mugnaio stated that the issue of applying the requirement for supervision by the physician is directly related to the requirement of direct authorization of the otolaryngologist in terms of when these oversight requirements must occur. She stated that the distinction pointed out in the legal analysis regarding Section 2530.2(f) and 2530.2(g) distinguishes between the requirements that apply to the initial certification of the speech-language pathologist and that which would apply once the speech-language pathologist has been deemed competent by the otolaryngologist.

The Committee discussed the matter and determined that the language of 2530.2(g) allows the speech-language pathologist, once certified competent by an otolaryngologist, to perform endoscopy in an acute care facility that has appropriate emergency medical back-up available. However, it does not require authorization or the direct supervision of a physician and surgeon.

M/S/C:           Gerratt/Shannon

The Committee voted to recommend that the Board not pursue regulations to define the term “supervision” by a physician and surgeon. Further, the Committee voted to recommend that the interpretation of subdivisions (f) and (g) of Section 2530.2 as they relate to the requirements for authorization, supervision, and facility requirements are separate in terms of when to apply the provisions. Subdivision (f), containing the requirements for authorization and supervision, applies to the initial 25 endoscopic procedures performed by the speech-language pathologist during the initial training period. Subdivision (g) applies to the requirements once the speech-language pathologist is certified and is authorized to perform endoscopic procedures in an acute care facility with the appropriate emergency medical back-up.

Mr. Till stated that the last issue to be addressed relates to the phrase “Competent to perform these procedures.”

Ms. Washington explained that many facilities have competency standards that all personnel must meet in order to be deemed competent to perform that particular procedure.

Ms. Del Mugnaio stated that competency is a very difficult issue to regulate.

M/S/C:        Gerratt/Washington

The Committee voted to recommend to the Board that no further regulatory action should be pursued to define the phrase "Competent to perform these procedures."

There being no further discussion, Chairperson Till adjourned the meeting at 5:20 p.m.

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Annemarie Del Mugnaio, Executive Officer